State of California)						
County of San Luis Obispo) ss.)						
Term of Registration: 2 years							
CERTIFICATE Of The undersigned declare(s):		N AS A PROFES essions Code Section 22452(РНОТОСОРІЕ	ER		
	(Please Print or Type) (Nam	e of Individual/Partnership/C	Corporation)				
is a natural person (individu	al); a(State of Incorporate	-	a partnersh	nip.			
Registration in the County of S in this County.	an Luis Obispo is pr	oper because my	residence	principal place	e of business		
If an individual, I have not been convicted of a felony.							
If an partnership or corp felony.	oration, and no ger	neral partner or cor	porate offic	eer has been co	nvicted of a		
The name(s), address(es), age(s) and telephone nur	mber(s) of the indiv	ridual, partne	ers or corporate	officers are:		
Name:	Date of Birth: Age:			Age:			
Title:			Telephone:				
Address: *Please use an attached sheet			s) and/or co	rporate officer	(s).		
I/partnership/corporation will perform my/its duty as a professional photocopier in compliance with the							
provision of law governing the transmittal of confidential documentary information in this State.							
The undersigned declares under penalty of perjury under the laws of the State of California that the foregoing							
is true and correct.							
Date: Sign	nature:						
Registration No Ro	egistration Effective	e Date:	Expira	ntion Date:			
Bonding Company:	Bond No						
Commence Date:	Term:						

PROFESSIONAL PHOTOCOPIER CERTIFICATE OF REGISTRATION CORPORATION OR PARTNERSHIP

The name(s), address(ex	s), age(s) and telephone number	mber(s) of the individual, part	ners or corporate officers are:
Name:			Age:
Title:		Telephone:	
Address:			
The undersigned declar is true and correct.	res under penalty of perjury	under the laws of the State of	f California that the foregoing
Date:	Signature:		
Name:			Age:
Title:		Telephone:	
Address:			
The undersigned declar is true and correct.	res under penalty of perjury	under the laws of the State of	f California that the foregoing
Date:	Signature:		
Name:			Age:
Title:		Telephone:	
Address:			
The undersigned declar	es under penalty of perjury	under the laws of the State of	f California that the foregoing
is true and correct.			
Date:	Signature:		
Name:			Age:
Title:		Telephone:	
Address:			
The undersigned declar	es under penalty of perjury	under the laws of the State of	f California that the foregoing
is true and correct.			
Date:	Signature:		